

Centralized Provider Credentialing

FSSA's efforts to streamline and improve provider experience

Indiana Family and Social Services Administration
Office of Medicaid Policy and Planning
May 26, 2016



Agenda

- *Provider experience today*
- *Goals and future state*
- *Project timeline*
- *Next Steps and Open Q&A*

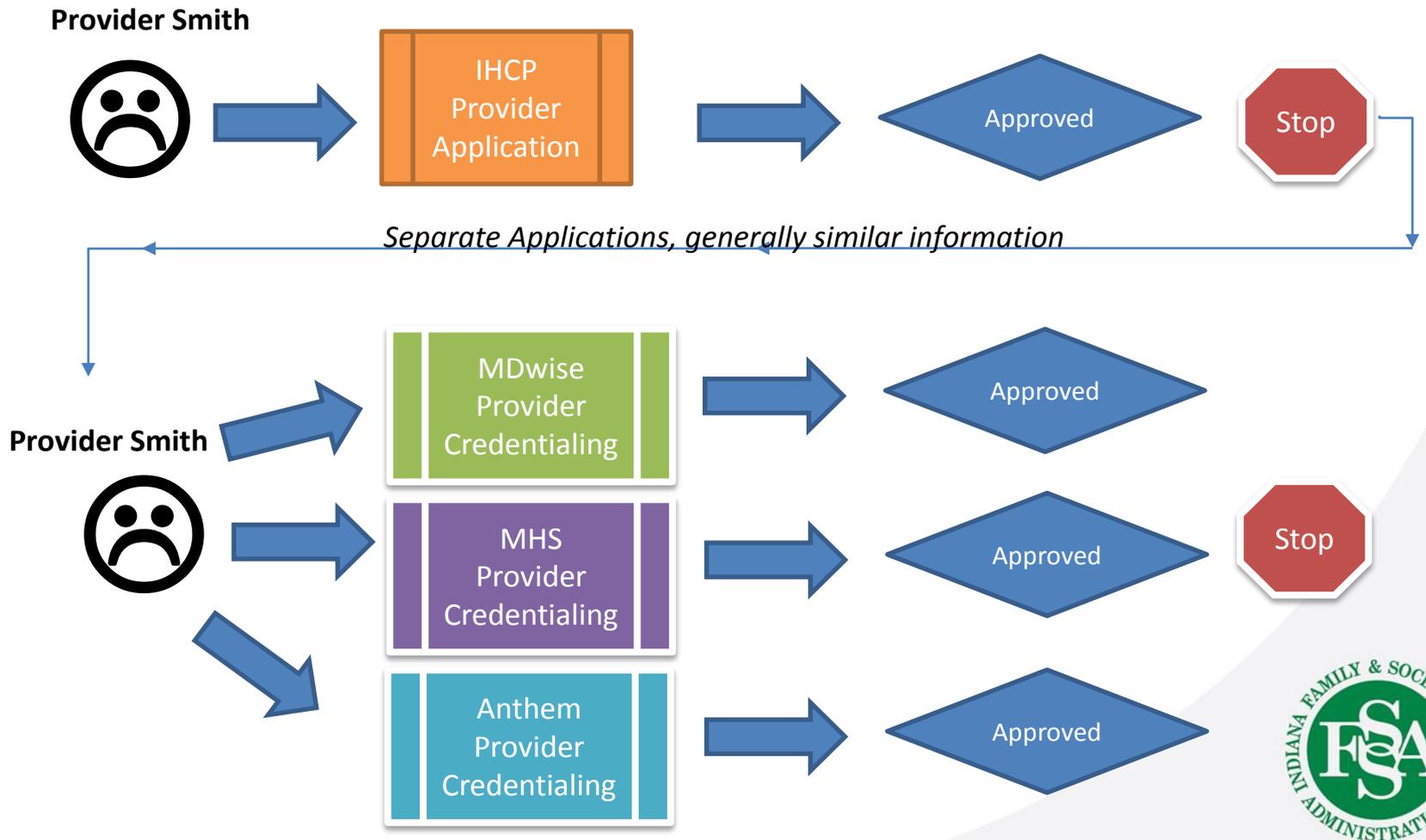


Provider Experience - Today

- Providers must first enroll as an Indiana Health Coverage Programs (IHCP) provider prior to credentialing with a managed care entity (MCE)
- Hewlett Packard Enterprise (HPE) has 15 day service level agreement to process “clean” enrollments
- MCE has 120 days to credential
- Provider submits substantially similar information up to four times to HPE and MCEs



Four applications, four decisions



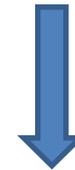
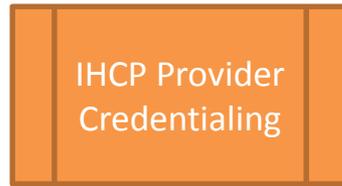
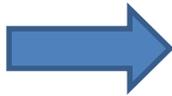
Goals and Future State

- Unified credentialing process/credentials verification organization (CVO) for all Medicaid programs
- Similar processing times, but in parallel
- Single point of accountability for all provider enrollment and credentialing
- Solution that respects MCEs' ability to make network decisions and maintain NCQA accreditation
- Visibility into the process for providers



One application, one decision

Provider Smith



Project Scope

- Intended to include:
 - all providers, including fee-for-service (eventually)
 - all provider enrollment/credentialing functions, revalidations, site visits, fingerprints, and background checks
 - record updates (*e.g.*, addresses, program participation)
 - automation for mandatory terminations and exclusions (*e.g.*, EPLS, PECOS)
 - provider training
- MCEs will play an active role in maintenance and administration of process
 - audits of outcomes
 - seats on the credentialing committee



Project Timeline

Approximate Date	Milestone
April 14, 2016	Request for Information #16-098 released
May 18	RFI responses due
Mid-June	Possible RFI demonstrations/oral presentations
Late July	Request for Proposal released
Early/Mid-August	RFP responses due
Early September	RFP award announced; contract issued
Sept. 2016 – Feb. 2017	Requirements gathering; design and development
March 2017	Pilot testing
April 2017	Implementation for managed care providers

Target implementation is **April 2017**. *Dates subject to change depending on the requirements, other systems implementations, managed care procurements, and other administration priorities.*



Next Steps and Q&A

Next Steps

- Continue according to schedule; create procurement documents for RFP
- After solution is chosen, initiate requirements gathering sessions with key stakeholders (MCEs, FSSA waiver divisions, provider representatives, etc.)
- Monitor interaction of project with other major initiatives

Open Q&A

- Follow-up questions (unrelated to the procurement) may be addressed to Shane Hatchett (Shane.Hatchett@fssa.in.gov) and Tatum Miller (Tatum.Miller@fssa.in.gov).

